PAGE 1 / 40

Image# 201609029023771278

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

I OKWI 3X	For Other Than An A	Authorized Commit	tee		Office Use Only	
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typover the lines.	ping, type	12FE4M5		
Mississippi Conservati	ves					
ADDRESS (number and street)	PO Box 2096					
Check if different						
than previously reported. (ACC)	Jackson			MS L	39225	
2. FEC IDENTIFICATION N	UMBER ▼	CITY A		STATE A	ZIP COI	DE 🛦
C C00554774	3	B. IS THIS REPORT	NEW (N) OR	(A)	IENDED	
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)	May 20 (M5)		20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:		Mar 20 (M3)	Jun 20 (M6)		20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (0	21)	Apr 20 (M4)	Jul 20 (M7)		20 (M10)	Jan 31 (YE)
July 15 Quarterly Report (0	PRE-Election			General (Runoff (12R)
October 15 Quarterly Report (0	Report for th	e: Convention	(12C)	Special (128)	
January 31 Year-End Report (Y	/E) EI	ection on 06	24	2014	in the State of	MS
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Electic Report for th		0G)	Runoff (3	0R)	Special (30S)
Termination Report (TER)		ection on	/ D D /	Y W Y W Y	in the State of	
5. Covering Period 05		14 through	06_	04	2014	
certify that I have examined th	nis Report and to the bes	st of my knowledge and	belief it is tru	e. correct and	d complete.	
Type or Print Name of Treasure	•	,			,	
Signature of Treasurer Mr. I	Brian Perry	[Electronica	lly Filed] □	ate 09	/ D D / 02	2016
NOTE: Submission of false, erron	eous, or incomplete inform	nation may subject the pe	erson signing th	is Report to th	ne penalties of 2 U	I.S.C. §437g.
Office Use Only					FEC FOR Rev. 12/20	

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Mississippi Conservatives 05 2014 06 04 2014 Report Covering the Period: 15 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 0.00 January 1, 2014 (b) Cash on Hand at 132600.02 Beginning of Reporting Period..... 1280000.00 2162143.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 2162143.00 1412600.02 6(a) and 6(c) for Column B)..... 1324032.25 2073575.23 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 88567.77 88567.77 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name

Mississippi Conservative:	N
---------------------------	---

ort Covering the Period: From: 05	15 2014 To	: 06 / 04 / 2014		
I. Receipts	COLUMN B Calendar Year-to-Date			
•				
Than Political Committees (i) Itemized (use Schedule A)	865000.00	1490950.00		
(ii) Unitomized	0.00	300.00		
		300.00		
Lines 11(a)(i) and (ii)▶	865000.00	1491250.00		
o) Political Party Committees	0.00	0.00		
,	415000.00	420693.00		
11(a)(iii), (b), and (c)) (Carry				
Totals to Line 33, page 5)▶	1280000.00	1911943.00		
ransfers From Affiliated/Other				
Party Committees	0.00	0.00		
II Loans Received	0.00	250150.00		
	7			
oan Repayments Received	0.00	0.00		
	7			
Carry Totals to Line 37, page 5)	0.00	0.00		
	0.00	0.00		
·				
, ,	0.00	50.00		
	0.00	0.00		
(0.00	0.00		
a) Lovin Funds (from Schodula HE)	0.00	0.00		
of Levin Funds (noin Schedule HS)				
c) Total Transfers (add 18(a) and 18(b))	0.00	0.00		
	Contributions (other than loans) From: a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	Contributions (other than loans) From: a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	II. Disbursements COLUMN A Total This Period			
Operating Expenditures:	Iotai IIIIs Fellou	Calendar Year-to-Date		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)				
(i) Federal Share	0.00	0.00		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating	67425 40	464204.64		
Expenditures	67125.10	164384.61		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	67125.10	164384.61		
2. Transfers to Affiliated/Other Party				
Committees	0.00	0.00		
Contributions to Federal Candidates/Committees				
and Other Political Committees	0.00	0.00		
Independent Expenditures	4020757.45	4050040.00		
(use Schedule E)	1036757.15	1659040.62		
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00		
(use Scriedule F)	79	0.00		
6. Loan Repayments Made	220150.00	250150.00		
- I all the second seco				
7. Loans Made	0.00	0.00		
8. Refunds of Contributions To: (a) Individuals/Persons Other				
Than Political Committees	0.00	0.00		
	0.00	0.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees	0.00	0.00		
(such as PACs)	7	7 7		
(d) Total Contribution Refunds				
(add Lines 28(a), (b), and (c))▶	0.00	0.00		
9. Other Disbursements	0.00	0.00		
_				
D. Federal Election Activity (2 U.S.C. §431(20))				
(a) Allocated Federal Election Activity				
(from Schedule H6) (i) Federal Share	0.00	0.00		
(i) i edelai oliale				
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid Entirely				
With Federal Funds	0.00	0.00		
(c) Total Federal Election Activity (add				
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00		
Total Biblion and A. C. C. C. C.				
. Total Disbursements (add Lines 21(c), 22,		***************************************		
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	1324032.25	2073575.23		
2. Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)	1324032.25	2073575.23		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	1280000.00	1911943.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1280000.00	1911943.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	67125.10	164384.61
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	67125.10	164384.61

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 6 OF Use separate schedule(s) (check only one)

	EMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a 11b 11c 12
			y person for the purpose of soliciting contributions ittee to solicit contributions from such committee.
or	NAME OF COMMITTEE (In Full) Mississippi Conservatives	name and address of any political commi	ttee to solicit contributions from such committee.
Α.	Full Name (Last, First, Middle Initial) Michael Bloomberg Mailing Address 909 Third Avenue City New York FEC ID number of contributing federal political committee. Name of Employer Bloomberg Inc. Receipt For: Primary General Other (specify) Other (specify)	State Zip Code NY 10022 C Occupation Executive Aggregate Year-to-Date ▼ 250000.00	Date of Receipt 19 2014 Transaction ID: SA11AI.4426 Amount of Each Receipt this Period 250000.00 Memo Item Contribution
В.	Full Name (Last, First, Middle Initial) James Creekmore Mailing Address 7 Cypress Lane City Jackson FEC ID number of contributing federal political committee. Name of Employer Telapex Receipt For: Primary General Other (specify) ▼	State Zip Code MS 39211 C Occupation Vice President Aggregate Year-to-Date ▼ 15000.00	Date of Receipt M
C.	Full Name (Last, First, Middle Initial) Wade Creekmore Mailing Address 1018 Highland Colony Parkway Suite 500 City Ridgeland FEC ID number of contributing federal political committee. Name of Employer Telapex Receipt For: Primary General Other (specify)	State Zip Code MS 39157 C Occupation President Aggregate Year-to-Date ▼	Date of Receipt 05
s	UBTOTAL of Receipts This Page (optional)		260000.00
Т	OTAL This Period (last page this line number o	nly)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

	F	FOR LINE NUMBER: PAGE 7 OF									40
Use separate schedule(s)	(c	he	ck only	or	ne)						
for each category of the Detailed Summary Page		X	11a		11b		11c		12		
			13		14		15		16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Mississippi Conservatives Full Name (Last, First, Middle Initial) Crow Holdings Date of Receipt Mailing Address 3819 Maple Ave. 2014 27 City State Zip Code Transaction ID: SA11AI.4428 TX 75219 Dallas Amount of Each Receipt this Period FEC ID number of contributing 25000.00 federal political committee. Memo Item Name of Employer Occupation Contribution Receipt For: Aggregate Year-to-Date ▼ Primary General 25000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Howard Leach Date of Receipt Mailing Address 399 Park Avenue 06 02 2014 City State Zip Code Transaction ID: SA11AI.4401 New York NY 10022 Amount of Each Receipt this Period FEC ID number of contributing 25000.00 federal political committee. Memo Item Name of Employer Occupation Leach Capital LLC Contribution President Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 50000.00 Full Name (Last, First, Middle Initial) c. John Nau Date of Receipt Mailing Address 7777 Washington Ave. 2014 05 27 City State Zip Code Transaction ID: SA11AI.4422 TX Houston 77007 Amount of Each Receipt this Period FEC ID number of contributing C 100000.00 federal political committee. Memo Item Name of Employer Occupation Contribution President and C.E.O Silver Eagle Distributors, LP Receipt For: Aggregate Year-to-Date ▼ Primary General 100000.00 Other (specify) 150000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 8 OF Use separate schedule(s) for each category of the (check only one)

	WIZED RECEIPTS		Detailed Summary Page	X	11a 13		11k	b	11c	\vdash	12 16	17	
or fo	information copied from such Reports and State or commercial purposes, other than using the i				or the		pose		oliciting	g con	ntributi	ons	
\	AME OF COMMITTEE (In Full) Mississippi Conservatives												
	ull Name (Last, First, Middle Initial) Hon. John Palmer			Date of Receipt									
_	failing Address PO Box 3747			M = M	′	D	02	/ Y)14	Y		
	ity	State	Zip Code		Trans	acti	ion	ID : S	A11Al.	4396	ì		
_	lackson	MS	39225	A	mount	of	Eac	ch Re	ceipt th	is Pe	eriod		
	EC ID number of contributing ederal political committee.	С			7		7		- 1	5	0.000	0	
N	ame of Employer	Occupation		⊢ ľ			ltem	ı					
	elf-Employed	Investor		Co	ontribu	tion	l						
R	eceipt For:	Aggregate	Year-to-Date ▼										
	Primary General Other (specify) ▼		15000.00										
	ull Name (Last, First, Middle Initial) Sean Parker				Date of	Re	eceip	ot					
N	failing Address 40 W 10th St.	Address 40 W 10th St.				05 16 2014					Y		
	ity	State	Zip Code		Trans	acti	ion	ID : S	A11AI.4	4425	i .		
	New York	NY	10011	A	mount	of	Eac	ch Re	ceipt th	is Pe	eriod		
	EC ID number of contributing ederal political committee.	ÿ						250000.00					
	ame of Employer elf-Employed	Occupation Entrepreneu		Memo Item Contribution									
R	eceipt For: Primary General Other (specify) ▼	· ·	Year-to-Date ▼ 250000.00]									
	ull Name (Last, First, Middle Initial) Mr. Joe Sanderson				Date of	Re	eceip	ot					
N	failing Address PO Bo 988				M M M	/	D	22	/ Y	20°	14	Y	
	ity _aurel	State MS	Zip Code 39441	A					A11AI. ceipt th				
	EC ID number of contributing ederal political committee.	С						0.000	0				
N	ame of Employer	Occupation		<u>ا</u> ا	_		ltem	1					
_	anderson Farms	Chairman a	nd CEO		ontribu	tion	1						
R	eceipt For:	Aggregate	Year-to-Date ▼										
	Primary General Other (specify) ▼		200000.00	1									
SU	BTOTAL of Receipts This Page (optional)						7			355	0.000	0	
TO	TAL This Period (last page this line number or	nly)					1						

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 9 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	11a 11b 11c 12 13 14 15 16 17				
or for commercial purposes, other than u	ts and Statements may not be sold or used by any using the name and address of any political committ	person for the purpose of soliciting contributions				
NAME OF COMMITTEE (In Full) Mississippi Conservatives						
Full Name (Last, First, Middle Initial) Warren Stephens Mailing Address 111 Center St City	Stato Zin Codo	Date of Receipt 05 28 2014				
Little Rock	State Zip Code AR 72203	Transaction ID : SA11AI.4397				
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 50000.00				
Name of Employer Stephens Inc. Receipt For: Primary General Other (specify) ▼	Occupation President Aggregate Year-to-Date ▼ 75000.00	Contribution				
Full Name (Last, First, Middle Initial) 3. WDL Holdings LLC		Date of Receipt				
Mailing Address 589 Highland Colony Suite 120		05 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City Ridgeland	State Zip Code MS 39157	Transaction ID : SA11AI.4433 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	50000.00				
Name of Employer	Occupation	Contribution				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 50000.00					
Full Name (Last, First, Middle Initial)	·	Date of Receipt				
Mailing Address		M = M / D = D / Y = Y = Y				
City	State Zip Code	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C					
Name of Employer	Occupation	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼					
SUBTOTAL of Receipts This Page (opt	ional)	100000.00				
TOTAL This Period (last page this line	number only)	865000.00				

TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 OF 40 (check only one) 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Mississippi Conservatives		person for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) AMERICAN CROSSROADS Mailing Address P.O. BOX 34413 City WASHINGTON FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code DC 20043 C C00487363 Occupation Aggregate Year-to-Date ▼ 120000.00	Date of Receipt M
Full Name (Last, First, Middle Initial) AMERICAN CROSSROADS Mailing Address P.O. BOX 34413 City WASHINGTON FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code DC 20043 C C00487363 Occupation Aggregate Year-to-Date ▼ 160000.00	Date of Receipt M
Full Name (Last, First, Middle Initial) BLUEGRASS COMMITTEE Mailing Address 220 1/2 E ST., NE City WASHINGTON FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code DC 20002 C C00235655 Occupation Aggregate Year-to-Date ▼ 50000.00	Date of Receipt 05 27 2014 Transaction ID : SA11C.4414 Amount of Each Receipt this Period 50000.00 Memo Item Contribution
SUBTOTAL of Receipts This Page (optional)		210000.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 OF 40 (check only one)
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Mississippi Conservatives		
Full Name (Last, First, Middle Initial) MAIN STREET ADVOCACY Mailing Address 1200 PENNSYLVANIA AVE N PO BOX 4096 City WASHINGTON FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary Other (specify) Full Name (Last, First, Middle Initial)	State Zip Code DC 20004 C C90013004 Occupation Aggregate Year-to-Date 100000.00	Date of Receipt 05 27 2014 Transaction ID: SA11C.4413 Amount of Each Receipt this Period 100000.00 Memo Item Contribution
PROMOTING OUR REPUBLICAN Mailing Address 8331 LITTLE HARBOR DRIVE City CINCINNATI FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)		Date of Receipt M
Full Name (Last, First, Middle Initial) RELY ON YOUR BELIEFS FUND Mailing Address 209 PENNSYLVANIA AVENU City WASHINGTON FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)		Date of Receipt 05 27 2014 Transaction ID : SA11C.4412 Amount of Each Receipt this Period 5000.00 Memo Item Contribution
SUBTOTAL of Receipts This Page (optional)	•	130000.00
TOTAL This Period (last page this line number	only)	

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 OF 40 (check only one) 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Mississippi Conservatives			erson for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) ROCK CITY PAC Mailing Address 1015 STONEBRIDGE PARK City FRANKLIN FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State TN C Coo.	Zip Code 37069 436410 Year-to-Date ▼ 25000.00	Date of Receipt M M M O2 2014 Transaction ID: SA11C.4418 Amount of Each Receipt this Period 25000.00 Memo Item Contribution
Full Name (Last, First, Middle Initial) TEXANS FOR A CONSERVATIVE Mailing Address PO BOX 817 City AUSTIN FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary Other (specify) Other (specify)	State TX C C009	Zip Code 78767 542217 Year-to-Date ▼	Date of Receipt M
Full Name (Last, First, Middle Initial) Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)		Zip Code Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		•	75000.00
TOTAL This Period (last page this line number	only)		415000.00

SCHEDULE B (FEC Form 3X)	11	FOR LINE	NUMBER: PAGE 13 OF 40
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any information copied from such Departs and Cities	nonte may not be sald as		
Any information copied from such Reports and Staten or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)			
Mississippi Conservatives			
Full Name (Last, First, Middle Initial)			
A. Capstone Public Affairs LLC			Date of Disbursement
Mailing Address PO Box 2096			06 02 2014
	State Zip Code		Transaction ID : SB21B.4392
Jackson Purpose of Disbursement	MS 39225		
Social Media Buys		004	Amount of Each Disbursement this Period
Candidate Name		Category/	2500.00
Mississippi Conservatives		Type	2500.00
Senate x	nent For: 2014 Primary General Other (specify)		Memo Item
State: District:	Carol (opcony)		
Full Name (Last, First, Middle Initial)			
3. Capstone Public Affairs LLC			Date of Disbursement
Mailing Address PO Box 2096			06 02 2014
Jackson	State Zip Code MS 39225		Transaction ID : SB21B.4393
Purpose of Disbursement Political Strategy Consulting		001	Amount of Each Disbursement this Period
Candidate Name		Category/	
Mississippi Conservatives		Type	1500.00
Senate x	nent For: 2014 Primary General Other (specify)		Memo Item
State: District:	(
Full Name (Last, First, Middle Initial)			
Paradigm Government Relations			Date of Disbursement
Mailing Address 530 George St.			05 20 2014
City	State Zip Code		
Jackson	MS 39202		Transaction ID: SB21B.4317
Purpose of Disbursement Canvassing / Get Out The Vote (GOTV)		001	Amount of Each Disbursement this Period
Candidate Name		Category/	Allocate of Each Biobarconicity and Folica
Mississippi Conservatives		Type	25000.00
Senate x	nent For: 2014 Primary General		Memo Item
State: District:	Other (specify) ▼		
<u> </u>			29000.00
SUBTOTAL of Disbursements This Page (optional)		·····	25555.50
TOTAL This Period (last page this line number only)		_	

SCHEDULE B (FEC Form 3X)	Use separate schedule(s) (check of		FOR LINE I	NE NUMBER: PAGE 14 OF 40 only one)	
TEMIZED DISBURSEMENTS	for each categor Detailed Summa	ry of the	21b 27	22 23 24 25 28a 28b 28c 29	
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam					
NAME OF COMMITTEE (In Full) Mississippi Conservatives	io una address si	any pontion		COLOR COMMISSION FOR TOWN COMMISSION	
Full Name (Last, First, Middle Initial)					
A. Paradigm Government Relations				Date of Disbursement	
Mailing Address 530 George St.				05 30 2014	
,	State Zip C	ode		Transaction ID : SB21B.4391	
	MS 3920	2		Transaction ib . 36216.4391	
Purpose of Disbursement Canvassing / Get Out The Vote			001	Amount of Each Disbursement this Per	
Candidate Name			Category/	35000.00	
Mississippi Conservatives			Туре	33000.00	
Senate x President	nent For: 2014 Primary Other (specify)	General		Memo Item	
State: District:					
Full Name (Last, First, Middle Initial) 3. Scott Howell & Company				Date of Disbursement	
Mailing Address 3900 Willow St. Suite 200				05 22 2014	
Dallas	State Zip C TX 7522			Transaction ID : SB21B.4436	
Purpose of Disbursement Shipping Fees			001	Amount of Each Disbursement this Per	
Candidate Name			Category/	115.26	
Mississippi Conservatives			Туре	113.20	
Senate x	nent For: 2014 Primary Other (specify)	General		Memo Item	
Full Name (Last, First, Middle Initial) Scott Howell & Company				Date of Disbursement	
Mailing Address 3900 Willow St. Suite 200				05 28 2014	
Dallas	State Zip C TX 7522			Transaction ID : SB21B.4434	
Purpose of Disbursement Shipping Cost			001	Amount of Each Disbursement this Peri	
Candidate Name Mississippi Conservatives			Category/ Type	30.00	
Office Sought: House Disbursen Senate	nent For: 2014 Primary Other (specify)	General	1,700	Memo Item	
State: President State:					

SCHEDULE B (FEC Form 3X)	Lloo poporato sebestido (-)	FOR LINE		PAGE 15 OF 40
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	24 25 2
	Detailed Summary Page	27	28a 28b	28c 29 3
Any information copied from such Reports and State				
or for commercial purposes, other than using the na	me and address of any polition	cal committee to	solicit contributions fi	rom such committee.
NAME OF COMMITTEE (In Full)				
Mississippi Conservatives				
Full Name (Last, First, Middle Initial)			Deta of Dist	
A. Susan Smith			Date of Disbursem	
Mailing Address 210 E Capitol St.			05 Z0	2014
Ste. 1262				
City Jackson	State Zip Code MS 39201		Transaction ID:	SB21B.4383
Purpose of Disbursement	33201			
GOtV Expenses		001	Amount of Each D	isbursement this Period
Candidate Name		Category/		500.00
Mississippi Conservatives Office Sought: House Disburse	ment For: 2014	Туре		130.00
Senate Disburse	D:		Memo Item	
President	Other (specify)			
State: District:	· 			
Full Name (Last, First, Middle Initial)				
3. Trustmark Bank			Date of Disbursem	
Mailing Address 190 E Capitol St.			05 15	2014
				2017
City	State Zip Code		Transaction ID :	SB21B.4372
Jackson Purpose of Disbursement	MS 39201			
Incoming Wire Transfer Fee		001	Amount of Each D	isbursement this Period
Candidate Name		Category/		45.00
Mississippi Conservatives		Type		15.00
	ment For: 2014		Memo Item	
Senate X	Primary General Other (specify) ▼			
State: District:	Carol (Specify)			
Full Name (Last, First, Middle Initial)				
C. Trustmark Bank			Date of Disbursem	ent
Moiling Address 400 F Carital Ct			05 15	
Mailing Address 190 E Capitol St.			05 15	2014
City	State Zip Code		Transaction ID :	SR21R 4842
Jackson Purpose of Disbursement	MS 39201		Transaction ib .	J I J. TO T_
Incoming Wire Transfer Fee		001	Amount of Foob D	ishurasment this Daried
Candidate Name		Category/	Amount of Each D	isbursement this Period
Mississippi Conservatives		Type		-15.00
	ment For: 2014		Memo Item	
Senate X	Primary General		_	
State: District:	Other (specify) ▼			
Giaic. District.				
SUBTOTAL of Disbursements This Page (optional).				500.00
TOTAL This Period (last page this line number only	r)			

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	1	FOR LINE NUMBER: PAGE 16 OF 40 (check only one)	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 26 28a 28b 28c 29 3	
Any information copied from such Reports and Staten or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full) Mississippi Conservatives				
Full Name (Last, First, Middle Initial)				
^{A.} Trustmark Bank			Date of Disbursement	
Mailing Address 190 E Capitol St.			05 16 2014	
	State Zip Code		Transaction ID : SB21B.4376	
Jackson Purpose of Disbursement	MS 39201			
Wire Transfer Fee		001	Amount of Each Disbursement this Period	
Candidate Name		Category/	20.00	
Mississippi Conservatives Office Sought: House Disbursen	nent For: 2014	Туре		
Senate x President	Primary General Other (specify)		Memo Item	
State: District:				
Full Name (Last, First, Middle Initial) Fustmark Bank			Date of Disbursement	
Mailing Address 190 E Capitol St.			05 16 2014	
Jackson	State Zip Code MS 39201		Transaction ID : SB21B.4843	
Purpose of Disbursement Wire Transfer Fee		001	Amount of Each Disbursement this Period	
Candidate Name		Category/		
Mississippi Conservatives		Type	-20.00	
Senate x	nent For: 2014 Primary General Other (specify)		Memo Item	
Full Name (Last, First, Middle Initial) Trustmark Bank			Date of Disbursement	
Mailing Address 190 E Capitol St.			05 19 7 7 7 7 7	
Jackson	State Zip Code MS 39201		Transaction ID : SB21B.4373	
Purpose of Disbursement Incoming Wire Transfer Fee		001	Amount of Each Disbursement this Period	
Candidate Name Mississippi Conservatives		Category/ Type	15.00	
Office Sought: House Disbursen Senate x	nent For: 2014 Primary General Other (specify)	.,,,,	Memo Item	
SUBTOTAL of Disbursements This Page (optional)			15.00	

ITEMIZED DISBURSEMENTS	Use separate schedule(s) (check	LINE NUMBER: PAGE 17 OF 40 conly one) 21b
Any information copied from such Reports and State or for commercial purposes, other than using the nar NAME OF COMMITTEE (In Full) Mississippi Conservatives		
Full Name (Last, First, Middle Initial) A. Trustmark Bank Mailing Address 190 E Capitol St.		Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Jackson Purpose of Disbursement Incoming Wire Transfer Fee Candidate Name Mississippi Conservatives	State Zip Code MS 39201 O01 Category Type ment For: 2014 Primary General Other (specify)	Amount of Each Disbursement this Period -15.00 Memo Item
Jackson Purpose of Disbursement Wire Transfer Fee Candidate Name Mississippi Conservatives Office Sought: House Disburse Senate President State: District:	State Zip Code MS 39201 O01 Category Type ment For: 2014 Primary General Other (specify)	Date of Disbursement M M M / 20 2014 Transaction ID : SB21B.4377 Amount of Each Disbursement this Period 20.00 Memo Item
Full Name (Last, First, Middle Initial) C. Trustmark Bank Mailing Address 190 E Capitol St. City Jackson Purpose of Disbursement Wire Transfer Fee Candidate Name Mississippi Conservatives	State Zip Code MS 39201 001 Category Type	Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

TEMIZED DISBURSEMENTS	Use separate schedule(s) (che for each category of the	DR LINE NUMBER: PAGE 18 OF 40 heck only one) 22 23 24 25 26
	Detailed Summary Page	27 28a 28b 28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the name		
NAME OF COMMITTEE (In Full) Mississippi Conservatives		
Full Name (Last, First, Middle Initial) - Trustmark Bank		Date of Disbursement
Mailing Address 190 E Capitol St.		05 21 2014
Jackson	tate Zip Code MS 39201	Transaction ID : SB21B.4381
Purpose of Disbursement Wire Transfer Fee	0	01 Amount of Each Disbursement this Period
Candidate Name Mississippi Conservatives	Ту	egory/ ype 20.00
Senate x	ent For: 2014 Primary	Memo Item
Full Name (Last, First, Middle Initial) 3. Trustmark Bank		Date of Disbursement
Mailing Address 190 E Capitol St.		05 22 2014
•	tate Zip Code MS 39201	Transaction ID : SB21B.4378
Purpose of Disbursement		
Wire Transfer Fee Candidate Name		Amount of Each Disbursement this Period
Wire Transfer Fee Candidate Name Mississippi Conservatives Office Sought: House Disbursem Senate	Cate	
Wire Transfer Fee Candidate Name Mississippi Conservatives Office Sought: House Disbursem Senate President	ent For: 2014 Primary General	egory/ ype Memo Item Date of Disbursement
Wire Transfer Fee Candidate Name Mississippi Conservatives Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial)	ent For: 2014 Primary General	egory/ ype 20.00 Memo Item
Wire Transfer Fee Candidate Name Mississippi Conservatives Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Trustmark Bank Mailing Address 190 E Capitol St.	ent For: 2014 Primary General	Date of Disbursement
Wire Transfer Fee Candidate Name Mississippi Conservatives Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Trustmark Bank Mailing Address 190 E Capitol St. City S Jackson Purpose of Disbursement Wire Transfer Fee	ent For: 2014 Primary General Other (specify) tate Zip Code MS 39201	Date of Disbursement Date of Disbursement Transaction ID: SB21B.4379 Amount of Each Disbursement this Period
Wire Transfer Fee Candidate Name Mississippi Conservatives Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Trustmark Bank Mailing Address 190 E Capitol St. City Jackson Purpose of Disbursement Wire Transfer Fee Candidate Name Mississippi Conservatives	cate Ty ent For: 2014 Primary General Other (specify) tate Zip Code MS 39201 Cate Ty	Date of Disbursement Date of Disbursement Transaction ID: SB21B.4379 Amount of Each Disbursement this Period egory/ ype 20.00
Wire Transfer Fee Candidate Name Mississippi Conservatives Office Sought: House Senate President State: Full Name (Last, First, Middle Initial) Trustmark Bank Mailing Address 190 E Capitol St. City Sackson Purpose of Disbursement Wire Transfer Fee Candidate Name Mississippi Conservatives Office Sought: House Senate Disbursement Wire Senate Disbursement Mississippi Conservatives Office Sought: House Senate	cate Ty ent For: 2014 Primary General Other (specify) tate Zip Code MS 39201 Ocate	Date of Disbursement Date of Disbursement Date of Disbursement Transaction ID: SB21B.4379 Amount of Each Disbursement this Period
Wire Transfer Fee Candidate Name Mississippi Conservatives Office Sought: House Senate President State: Full Name (Last, First, Middle Initial) Trustmark Bank Mailing Address 190 E Capitol St. City Jackson Purpose of Disbursement Wire Transfer Fee Candidate Name Mississippi Conservatives Office Sought: House Senate President Disbursement Wire Transfer Fee Senate President	ent For: 2014 Primary General Other (specify) tate Zip Code MS 39201 Cate Ty Cher For: 2014 Primary General Other (specify) Other (specify) Cate Ty	Date of Disbursement Date of Disbursement Transaction ID: SB21B.4379 Amount of Each Disbursement this Period eggry/ ype Memo Item

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s)	1	FOR LINE NUMBER: PAGE 19 OF 40 (check only one)	
II LIVIIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 26 28a 28b 28c 29 30	
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan				
NAME OF COMMITTEE (In Full) Mississippi Conservatives				
Full Name (Last, First, Middle Initial)				
^{A.} Trustmark Bank			Date of Disbursement	
Mailing Address 190 E Capitol St.			05 22 2014	
•	State Zip Code		Transaction ID : SB21B.4380	
Jackson Purpose of Disbursement	MS 39201			
Incoming Wire Transfer Fee		001	Amount of Each Disbursement this Period	
Candidate Name		Category/	15.00	
Mississippi Conservatives		Туре	13.00	
Senate X President	nent For: 2014 Primary General Other (specify) ▼		Memo Item	
State: District:				
Full Name (Last, First, Middle Initial) B. Trustmark Bank			Date of Disbursement	
Mailing Address 190 E Capitol St.			05 22 2014	
Jackson	State Zip Code MS 39201		Transaction ID : SB21B.4846	
Purpose of Disbursement Wire Transfer Fee		001	Amount of Each Disbursement this Period	
Candidate Name		Category/		
Mississippi Conservatives		Туре	-20.00	
	nent For: 2014 Primary General Other (specify) ▼		Memo Item	
Full Name (Last, First, Middle Initial) C. Trustmark Bank			Date of Disbursement	
Mailing Address 190 E Capitol St.			05 / D D / Y Y Y Y Y Y Y Y Z Z Z Z Z Z Z Z Z Z Z	
Jackson	State Zip Code MS 39201		Transaction ID : SB21B.4847	
Purpose of Disbursement Wire Transfer Fee Candidate Name		001	Amount of Each Disbursement this Period	
Mississippi Conservatives		Category/ Type	-20.00	
	nent For: 2014 Primary General Other (specify)	.,,,,,	Memo Item	
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)			-25.00	

TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page (check on 21b	22 23 24 25 26
Any information copied from such Reports and Statem	ents may not be sold or used by any per	
or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) Mississippi Conservatives	e and address of any political committee	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) A: Trustmark Bank Mailing Address 190 E Capitol St.		Date of Disbursement Date of Disbursement
·	tate Zip Code	
Purpose of Disbursement Incoming Wire Transfer Fee Candidate Name Mississippi Conservatives Office Sought: House Senate Disbursem	MS 39201 Out Category/ Type ent For: 2014 Primary General Other (specify) Other (specify)	Amount of Each Disbursement this Period -15.00 Memo Item
Full Name (Last, First, Middle Initial) 3. Trustmark Bank Mailing Address 190 E Capitol St.		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y
Jackson Purpose of Disbursement Wire Transfer Fee Candidate Name Mississippi Conservatives Office Sought: House Disbursem Senate	tate Zip Code MS 39201 O01 Category/ Type ent For: 2014 Primary General Other (specify) Other (specify)	Transaction ID : SB21B.4375 Amount of Each Disbursement this Period 20.00 Memo Item
Full Name (Last, First, Middle Initial) Trustmark Bank Mailing Address 190 E Capitol St.		Date of Disbursement Date of Disbursement Date of Disbursement 2014
City S		
Purpose of Disbursement Wire Transfer Fee Candidate Name Mississippi Conservatives Office Sought: House Senate Disbursem	tate Zip Code MS 39201 001 Category/ Type ent For: 2014 Primary General Other (specify) Other (specify)	Amount of Each Disbursement this Period -20.00 Memo Item
Purpose of Disbursement Wire Transfer Fee Candidate Name Mississippi Conservatives Office Sought: House Senate President President	MS 39201 001 Category/ Type ent For: 2014 Primary General Other (specify) ▼	Amount of Each Disbursement this Period

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) (check or		E NUMBER: PAGE 21 OF 40 nlv one)	
TI LIVIIZED DISBORSEIVIEN IS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 26 28a 28b 28c 29 30	
Any information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full) Mississippi Conservatives	, , , , , , , , , , , , , , , , , , ,			
Full Name (Last, First, Middle Initial)				
A. Trustmark Bank			Date of Disbursement	
Mailing Address 190 E Capitol St.			05 28 2014	
	tate Zip Code		Transaction ID : SB21B.4384	
Jackson Purpose of Disbursement	MS 39201			
Wire Transfer Fee		001	Amount of Each Disbursement this Period	
Candidate Name		Category/	20.00	
Mississippi Conservatives		Туре	20.00	
Senate x President	nent For: 2014 Primary General Other (specify) ▼		Memo Item	
State: District:				
Full Name (Last, First, Middle Initial) 3. Trustmark Bank			Date of Disbursement	
Mailing Address 190 E Capitol St.			05 28 2014	
Jackson	itate Zip Code MS 39201		Transaction ID : SB21B.4388	
Purpose of Disbursement Wire Transfer Fee		001	Amount of Each Disbursement this Period	
Candidate Name		Category/		
Mississippi Conservatives		Type	20.00	
Senate x	nent For: 2014 Primary General Other (specify) ▼		Memo Item	
Full Name (Last, First, Middle Initial) Trustmark Bank			Date of Disbursement	
Mailing Address 190 E Capitol St.			05 28 7 2014	
Jackson	itate Zip Code MS 39201		Transaction ID : SB21B.4849	
Purpose of Disbursement Wire Transfer Fee Candidate Name		001	Amount of Each Disbursement this Period	
Mississippi Conservatives		Category/ Type	-20.00	
Office Sought: House Disbursem	nent For: 2014 Primary General Other (specify)	7,71	Memo Item	
SUBTOTAL of Disbursements This Page (optional)			20.00	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s) (check		R LINE NUMBER: PAGE 22 OF 40 ck only one)	
II LIVIIZED DISBURSEIVIEN IS	for each category of the Detailed Summary Page	21b	22 23 24 25 26 28a 28b 28c 29 30	
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full) Mississippi Conservatives				
Full Name (Last, First, Middle Initial)				
^{A.} Trustmark Bank			Date of Disbursement	
Mailing Address 190 E Capitol St.			05 28 2014	
•	State Zip Code		Transaction ID : SB21B.4850	
Jackson Purpose of Disbursement	MS 39201		Transaction is . GB21B.4630	
Wire Transfer Fee		001	Amount of Each Disbursement this Period	
Candidate Name		Category/	20.00	
Mississippi Conservatives		Type	-20.00	
Senate	nent For: 2014 Primary General Other (specify) ▼		Memo Item	
State: District:				
Full Name (Last, First, Middle Initial) B. Trustmark Bank			Date of Disbursement	
Mailing Address 190 E Capitol St.			05 30 2014	
Jackson	State Zip Code MS 39201		Transaction ID : SB21B.4385	
Purpose of Disbursement Wire Transfer Fee		001	Amount of Each Disbursement this Period	
Candidate Name		Category/		
Mississippi Conservatives		Type	20.00	
Senate x	nent For: 2014 Primary General Other (specify) ▼		Memo Item	
Full Name (Last, First, Middle Initial) C. Trustmark Bank			Date of Disbursement	
Mailing Address 190 E Capitol St.			05 30 7 2014	
Jackson	State Zip Code MS 39201		Transaction ID : SB21B.4386	
Purpose of Disbursement Wire Transfer Fee Candidate Name		001	Amount of Each Disbursement this Period	
Mississippi Conservatives		Category/ Type	20.00	
Office Sought: House Disbursem Senate x	nent For: 2014 Primary General Other (specify)	71	Memo Item	
SUBTOTAL of Disbursements This Page (optional)			20.00	

SCHEDULE B (FEC Form 3X) TEMIZED DISBURSEMENTS	Use separate schedule(s) (check		NE NUMBER: PAGE 23 OF 40 only one)	
I LIVIIZED DISBURSEIVIEN IS	for each category of the Detailed Summary Page	21h	22 23 24 25 26 28a 28b 28c 29 36	
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full) Mississippi Conservatives	,,,			
Full Name (Last, First, Middle Initial)				
A. Trustmark Bank			Date of Disbursement	
Mailing Address 190 E Capitol St.			05 30 2014	
	State Zip Code		Transaction ID : SB21B.4387	
Jackson Purpose of Disbursement	MS 39201			
Banking Fees		001	Amount of Each Disbursement this Period	
Candidate Name		Category/	375.00	
Mississippi Conservatives		Type	373.00	
Senate x	nent For: 2014 Primary General Other (specify) ▼		Memo Item	
State: District:				
Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial)			Date of Disbursement	
Mailing Address 190 E Capitol St.			05 30 2014	
Jackson	State Zip Code MS 39201		Transaction ID : SB21B.4449	
Purpose of Disbursement Interest Payment on Loan		001	Amount of Each Disbursement this Period	
Candidate Name		Category/		
Mississippi Conservatives		Type	2084.84	
Senate x	nent For: 2014 Primary General Other (specify)		Memo Item	
Full Name (Last, First, Middle Initial) - Trustmark Bank			Date of Disbursement	
Mailing Address 190 E Capitol St.			05 30 7 2014	
Jackson	State Zip Code MS 39201		Transaction ID : SB21B.4851	
Purpose of Disbursement Wire Transfer Fee		001	Amount of Each Disbursement this Period	
Candidate Name Mississippi Conservatives		Category/ Type	-20.00	
Office Sought: House Disbursem	nent For: 2014 Primary General Other (specify)	.,,,,	Memo Item	

ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE N (check only x 21b 27	
Any information copied from such Reports and Statemer or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) Mississippi Conservatives			
Full Name (Last, First, Middle Initial) A. Trustmark Bank Mailing Address 190 E Capitol St.			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
•	zate Zip Code MS 39201		Transaction ID : SB21B.4852
Wire Transfer Fee Candidate Name Mississippi Conservatives Office Sought: House Disbursement Senate	ent For: 2014 Primary General Other (specify) ▼	001 Category/ Type	Amount of Each Disbursement this Period -20.00 Memo Item
Full Name (Last, First, Middle Initial) B. Mailing Address			Date of Disbursement
Purpose of Disbursement Candidate Name Office Sought: House Disbursement Senate F		Category/ Type	Amount of Each Disbursement this Period Memo Item
Full Name (Last, First, Middle Initial) Mailing Address			Date of Disbursement
Purpose of Disbursement Candidate Name Office Sought: House Disbursement Senate F		Category/ Type	Amount of Each Disbursement this Period Memo Item
State: District: SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)			-20.00 67125.10

ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE N (check only 21b 27	
Any information copied from such Reports and Stateme or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) Mississippi Conservatives			
Full Name (Last, First, Middle Initial) A. Trustmark Bank Mailing Address 190 E Capitol St.			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
,	tate Zip Code MS 39201		Transaction ID : SB26.4429
Loan Payment Candidate Name Mississippi Conservatives Office Sought: House Disburseme	ent For: 2014 Primary General Other (specify)	009 Category/ Type	Amount of Each Disbursement this Period 220150.00 Memo Item
State: District: Full Name (Last, First, Middle Initial) B. Mailing Address			Date of Disbursement
Purpose of Disbursement Candidate Name Office Sought: House Disbursement Senate F		Category/ Type	Amount of Each Disbursement this Period Memo Item
Full Name (Last, First, Middle Initial) C. Mailing Address			Date of Disbursement
Purpose of Disbursement Candidate Name Office Sought: House Disbursement Senate F		Category/ Type	Amount of Each Disbursement this Period Memo Item
State: District: SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only)			220150.00 220150.00

SCHEDULE C (FEC Form 3X)

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 26 OF 40 FOR LINE 13 OF FORM 3X

	Detailed Suffilliary Page
IAME OF COMMITTEE (In Full) Mississippi Conservatives	Transaction ID : SC/10.4227
wiississippi Coriservatives	
LOAN SOURCE Full Name (Last, First, Middle Initial) Trustmark Bank	Memo Item Election: Primary General
Mailing Address 190 E Capitol St.	Other (specify)
City Jackson State MS ZIP Coo	de 39201
Original Amount of Loan Cumulative Payment To	Date Balance Outstanding at Close of This Period
250150.00	250150.00 0.00
TERMS Date Incurred Date Due	Interest Rate Secured:
M = M / D = D / Y = Y = Y = Y = M = M / D = D / Y =	6/03/14 2.86 % (apr) Yes No
List All Endorsers or Guarantors (if any) to Loan Source	
Full Name (Last, First, Middle Initial) Hon. Haley Barbour	Name of Employer BGR Group
Mailing Address 648 Dogwood Dr.	Occupation Founding Partner
City State ZIP Code	Amount Guaranteed 0.00
Yazoo City MS 39194	Outstanding: Transaction ID : SC/10.4227.0.SC2
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)	
TOTALS This Period (last page in this line only)	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If I	no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE 27 OF 40 FOR LINE 24 OF FORM 3X

		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Mississippi Conservatives		C C00554774
Check if 24-hour report 48-hour report Nev	v report Amends report file	d on M = M / D = D / Y = Y = Y
Full Name of Payee	Memo Item	Date of Public Distribution/Dissemination
American Media & Advocacy Group		05 30 7 2014
Mailing Address 815 Slaters Lane		Amount
City State	Zip Code	10968.00
Alexandria	22314	Transaction ID : SE.4365 Date of Disbursement or Obligation
Purpose of Expenditure Radio Ad Buy	Category/ Type 004	05
Name of Federal Candidate	Support Office	ce Sought: House District:
Mr. Christopher Brian McDaniel	X Oppose	President Senate State: MS
Calendar Year-To-Date Per Election for Office Sought	1655008.62 Dist	
	Maria las	Other (specify) -
Full Name of Payee American Media & Advocacy Group	☐ Memo Item	Date of Public Distribution/Dissemination 05 30 2014
Mailing Address 815 Slaters Lane		Amount
City State	Zip Code	3000.00
Alexandria VA	22314	Transaction ID : SE.4366 Date of Disbursement or Obligation
Purpose of Expenditure Pandora Digital Buy	Category/ Type 004	05 30 2014
Name of Federal Candidate	Support Office	ce Sought: House District:
Mr. Christopher Brian McDaniel	x Oppose	President Senate State: MS
Calendar Year-To-Date Per Election for Office Sought	1658008.62 Disl 201	bursement For: Primary General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	·····	13968.00
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	······	
Under penalty of perjury I certify that the independent expendi with, or at the request or suggestion of, any candidate or author party committee) any political party committee or its agent.		
Mr. Brian Perry [Ele	ectronically Filed]	09 02 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		

PAGE 28 OF 40
FOR LINE 24 OF FORM 3X
FEC IDENTIFICATION NUMBER ▼
C C00554774
M
of Public Distribution/Dissemination
05 30 2014
int
10000 00
-10968.00
of Disbursement or Obligation
1 M / D D / Y Y Y Y
05 30 2014
nt: House District:
ent Senate State: MS
nt For: X Primary General
Other (specify)
of Public Distribution/Dissemination
W M / D D / Y Y Y Y
05 30 2014
ınt
-3000.00
action ID : SE.4841 of Disbursement or Obligation
M M / D D / Y Y Y Y
05 30 2014
nt: House District:
ent X Senate State: MS
nt For: Primary General
Other (specify)
-13968.00
7
ir ent ent

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr. Brian Perry	[Electronically Filed]	Date 09 02 /	2016		
Signature					

Mr. Brian Perry

Signature

SCHEDULE E (FEC ITEMIZED INDEPENDEN		ES				PAGE 29	OF 40
NAME OF COMMITTEE (In F	(III)				FEC		ON NUMBER ▼
Mississippi Conserv	,				C	C00554774	ON NOMBER V
Check if 24-hour report	48-hour report	New re	eport Amends rep	ort filed or	n	/ D = D /	Y Y Y Y Y
Full Name of Payee Scott Howell & Com	pany		☐ Memo	ltem [Date of Pub	lic Distribution	/Dissemination
Mailing Address 3900 Wil				A	Amount		
Suite 20 City	U	State	Zip Code	— I			329620.00
Dallas		TX	75226			ID: SE.4278 oursement or (
Purpose of Expenditure TV ad buy			Category/ Type 004		05 05	16	2014
Name of Federal Candida	e		Support	Office S	Sought:	House	District:
Mr. Christopher Brian McD	aniel		x Oppose	P	resident	X Senate	State: MS
Calendar Year-To-Date Per Election for Office		-, -,	951903.47	Disburse 2014	ement For: Other (s	Primary Prima	General
Full Name of Payee Scott Howell & Co Mailing Address 3900 Wil	low St.		☐ Memo It		Date of Pub 05 Amount	lic Distribution	/Dissemination
City	<u> </u>	State	Zip Code				49986.00
Dallas		TX	75226			ID: SE.4279 bursement or	Obligation
Purpose of Expenditure Radio ad buy			Category/ Type 004		05	16	2014
Name of Federal Candida	te		Support	Office S	Sought:	House	District:
Mr. Christopher Brian McD	aniel		x Oppose		President	X Senate	State: MS
Calendar Year-To-Dat Per Election for Offic		-, -,	1001889.47	Disburs 2014	ement For: Other (Primary specify) ▶	/ General
(a) SUBTOTAL of Itemized	Independent Expendit	tures		. [379606.00
(b) SUBTOTAL of Unitemiz	red Independent Exper	nditures		··· •			
(c) TOTAL Independent Ex	penditures			··· •		7	
Under penalty of perjury I with, or at the request or si party committee) any politic	uggestion of, any cand	lidate or authorize					

[Electronically Filed]

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Date

02

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE	30	OF	40	_
FOR LI	NE 24	OF FO	DRM 3X	
ENTIFI	CATIO	N NUM	BER ▼	

	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Mississippi Conservatives	C C00554774
Check if 24-hour report 48-hour report New report Amends report	filed on Man / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Scott Howell & Company	05 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3900 Willow St.	Amount
Suite 200 City State Zip Code	6915.00
Dallas TX 75226	Transaction ID : SE.4328 Date of Disbursement or Obligation
Purpose of Expenditure Radio Ad Buy Category/ Type 004	05 / 21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support	Office Sought: House District:
Mr. Christopher Brian McDaniel Mr. Christopher Brian McDaniel Mr. Christopher Brian McDaniel	President Senate State: MS
Odioridal Todi To Bato	Disbursement For: Primary General Other (specify)
Full Name of Payee	
Scott Howell & Company	05 22 2014
Mailing Address 3900 Willow St.	Amount
Suite 200 City State Zip Code	5000.00
Dallas TX 75226	Transaction ID : SE.4331 Date of Disbursement or Obligation
Purpose of Expenditure Radio Ad Buy Category/ Type 004	05 22 2014
Name of Federal Candidate Support	Office Sought: House District:
Mr. Christopher Brian McDaniel Mr. Christopher Brian McDaniel Mr. Christopher Brian McDaniel	President Senate State: MS
	Disbursement For: ✓ Primary General Other (specify) ✓
(a) SUBTOTAL of Itemized Independent Expenditures	
(b) SUBTOTAL of Unitemized Independent Expenditures	>
(c) TOTAL Independent Expenditures	>
Under penalty of perjury I certify that the independent expenditures reported herein were nowith, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	
Mr. Brian Perry [Electronically Filed] Date	09
Signature	

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE	31	OF	40	
FOR L	INE 24	OF FO	ORM 3X	

		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Mississippi Conservatives		C C00554774
Check if 24-hour report 48-hour report New report	Amends report filed on	n
Full Name of Payee	☐ Memo Item ☐	Date of Public Distribution/Dissemination
Scott Howell & Company		05 22 / 2014
Mailing Address 3900 Willow St.	А	Amount
Suite 200 City State Zip Code	г	15000.00
Dallas TX 75226	Tra	ransaction ID : SE.4332 Date of Disbursement or Obligation
Purpose of Expenditure Radio Ad Buy Categor Typ		05 22 / 2014
Name of Federal Candidate	Support Office S	Sought: House District:
Mr. Christopher Brian McDaniel		President Senate State: MS
Calendar Year-To-Date Per Election for Office Sought 1069193.		ement For: ✓ Primary General Other (specify)
Full Name of Payee Scott Howell & Company	Memo Item	Date of Public Distribution/Dissemination 05 / 27 / 2014
Mailing Address 3900 Willow St. Suite 200	A	Amount
City State Zip Code		294883.00
Dallas TX 75226		ransaction ID: SE.4341 Date of Disbursement or Obligation
Purpose of Expenditure TV Ad Buy Categor Typ	y/ 004	05 / 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Office S	Sought: House District:
Mr. Christopher Brian McDaniel	Oppose P	President Senate State: MS
Calendar Year-To-Date Per Election for Office Sought 1456574		ement For: Primary General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	· [309883.00
(b) SUBTOTAL of Unitemized Independent Expenditures	······	
(c) TOTAL Independent Expenditures	······	
Under penalty of perjury I certify that the independent expenditures reported with, or at the request or suggestion of, any candidate or authorized committee party committee) any political party committee or its agent.		
Mr. Brian Perry [Electronically Filed	Date 09	02 / 2016
Signature		

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE	32	OF	40 DRM 3X
FOR L	INE 24	OF FO	ORM 3X

		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Mississippi Conservatives		C C00554774
Check if 24-hour report 48-hour report New r	eport Amends report file	ed on Man / Dad / Yayayay
Full Name of Payee	Memo Item	Date of Public Distribution/Dissemination
Scott Howell & Company		05 27 2014
Mailing Address 3900 Willow St.		Amount
Suite 200 City State	Zip Code	30001.74
Dallas TX	75226	Transaction ID : SE.4342 Date of Disbursement or Obligation
Purpose of Expenditure Radio Ad Buy	Category/ Type 004	05 / 22 / 2014
Name of Federal Candidate	Support Office	ce Sought: House District:
Mr. Christopher Brian McDaniel	X Oppose	President Senate State: MS
Calendar Year-To-Date Per Election for Office Sought	Dist 1486576.30 201	bursement For: X Primary General Other (specify)
Full Name of Payee	Memo Item	Date of Public Distribution/Dissemination
Scott Howell & Company	_	05 22 2014
Mailing Address 3900 Willow St.		Amount
Suite 200 City State	Zip Code	-15000.00
Dallas TX	75226	Transaction ID : SE.4838 Date of Disbursement or Obligation
Purpose of Expenditure Radio Ad Buy	Category/ Type 004	05 22 2014
Name of Federal Candidate	Support Offi	ice Sought: House District:
Mr. Christopher Brian McDaniel	X Oppose	President Senate State: MS
Calendar Year-To-Date Per Election for Office Sought	1471576.30 Dis 201	bursement For: ✓ Primary General Other (specify) ✓
(a) SUBTOTAL of Itemized Independent Expenditures	>	15001.74
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	1 4 1 4 1 6
(c) TOTAL Independent Expenditures	·	
Under penalty of perjury I certify that the independent expenditur with, or at the request or suggestion of, any candidate or authoriz party committee) any political party committee or its agent.		
Mr. Brian Perry [Electr	ronically Filed]	09
Signature	24.0	

SCHEDULE E (FEC Form 3X) TEMIZED INDEPENDENT EXPENDITURES					PAGE 33 FOR LINE 24	OF 40 4 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC	IDENTIFICATIO	N NUMBER ▼
Mississippi Conservatives				С	C00554774	
Check if 24-hour report 48-hour report	New report	Amends repo	ort filed on	M = M	/ D D /	Y Y Y Y Y
Full Name of Payee Scott Howell & Company		☐ Memo It	em Date	of Pub	olic Distribution/I	Dissemination 2014
Mailing Address 3900 Willow St.			Amo		22	2014
Suite 200				-		
'		p Code 5226			ID : SE.4839	-5000.00
Purpose of Expenditure Radio Ad Buy	(Category/ Type 004	Date	05 DISI	bursement or O	2014
Name of Federal Candidate	ı	Support	Office Soug	ht:	House [District:
Mr. Christopher Brian McDaniel		X Oppose	Presid		x Senate	State: MS
Calendar Year-To-Date Per Election for Office Sought	14	466576.30	Disburseme		➤ Primary specify) ►	General
Full Name of Payee Scott Howell & Company		☐ Memo Ite	m Date	of Pub	olic Distribution/	Dissemination 2014
Mailing Address 3900 Willow St.			Amo	unt		
Suite 200	State Zi	ip Code	— r			35030.00
Dallas		75226			ID: SE.4346 bursement or C	
Purpose of Expenditure Radio Ad Buy	(Category/ Type 004		M 05	27	2014
Name of Federal Candidate	,	Support	Office Soug	ht:	House	District:
Mr. Christopher Brian McDaniel		X Oppose	Presi		X Senate	State: MS
Calendar Year-To-Date Per Election for Office Sought	15	501606.30	Disburseme 2014		✗ Primaryspecify) ►	General
(a) SUBTOTAL of Itemized Independent Expenditures			· [-7	7	30030.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es		•			
(c) TOTAL Independent Expenditures			· -		<i>y</i>	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its agr	or authorized co					
Mr. Brian Perry			M	D	D / Y Y	Y

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Date

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SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

PAGE FOR L	34 INE 24	OF 1 OF FC	40 DRM 3X	
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	FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Mississippi Conservatives	C C00554774
Check if 24-hour report 48-hour report New report Amends report filed of	on Mam / Dab / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
	05 28 2014
Mailing Address 3900 Willow St.	Amount
Suite 200	
City State Zip Code	15000.00
	ransaction ID : SE.4350 Date of Disbursement or Obligation
Purpose of Expenditure Radio Ad Buy Category/ Type 004	05 28 7 2014
Name of Federal Candidate Support Office	Sought: House District:
Mr. Christopher Prion McDaniel	President Senate State: MS
Calendar Year-To-Date Per Election for Office Sought Disburs 2014	sement For: ✓ Primary General Other (specify)
Full Name of Payee	
Scott Howell & Company	Date of Public Distribution/Dissemination 05 28 2014
Mailing Address 3900 Willow St.	Amount
Suite 200 City State Zip Code	35000.00
· '	ransaction ID : SE.4351
Purpose of Expenditure TV Media Ad Buy Category/ Type 004	Date of Disbursement or Obligation 05 28 2014
Name of Federal Candidate Support Office	Sought: House District:
	President Senate State: MS
Calendar Year-To-Date Per Election for Office Sought Disbur 2014	sement For: ✓ Primary General Other (specify) ✓
(a) SUBTOTAL of Itemized Independent Expenditures	50000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not mad with, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	
Mr. Brian Perry [Electronically Filed] Date 09	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	لىننىا لىا ل

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES					PAGE 35 FOR LINE 24	OF 40 4 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC I		N NUMBER ▼
Mississippi Conservatives				С	C00554774	
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M = M	/ D D /	Y
Full Name of Payee Scott Howell & Company		☐ Memo It	em Da	ate of Publ	lic Distribution/I	Dissemination 2014
Mailing Address 3900 Willow St.			Ar	nount	30	2014
Suite 200			— г			
City Dallas	State TX	Zip Code 75226			D: SE.4389 oursement or O	15000.00
Purpose of Expenditure Media Buy		Category/ Type 004		05	30	2014
Name of Federal Candidate		Support	Office So	ught:	House [District:
Mr. Christopher Brian McDaniel		X Oppose		sident	X Senate	State: MS
Calendar Year-To-Date Per Election for Office Sought	, ,	1673008.62	Disburser 2014	٦	➤ Primary pecify) ➤	General
Full Name of Payee United States Postal Service		☐ Memo Ite	em Da	ate of Pub	lic Distribution/	Dissemination 2014
Mailing Address 401 E South St			Ar	mount		
City	State	Zip Code				19226.23
Jackson	MS	39201			ID: SE.4318 oursement or C	bligation
Purpose of Expenditure Postage for Mail		Category/ Type 004		05	20	2014
Name of Federal Candidate		Support	Office Sc	ught:	House	District:
Mr. Christopher Brian McDaniel		x Oppose		esident	X Senate	State: MS
Calendar Year-To-Date Per Election for Office Sought	, , ,	1021115.70	Disburser 2014	ment For: Other (s	Primary specify) ▶	General
(a) SUBTOTAL of Itemized Independent Expenditure (b) SUBTOTAL of Unitemized Independent Expenditure	ures		• [7	7	34226.23
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidat party committee) any political party committee or its a	nt expenditures	reported herein were	not made	in coopera (if the rep	ation, consultat	ion, or concert not a political
Mr. Brian Perry			M = RA	/ D -) / У У	Y

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Date

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SCHEDULE F (FEC Form 3X)

ITEMIZED INDEPENDENT EXPENDITURES	S				PAGE 36 FOR LINE 2	OF 40 4 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC II	DENTIFICATION	ON NUMBER ▼
Mississippi Conservatives				С	C00554774	
Check if 24-hour report 48-hour report	New re	port Amends repo	ort filed on	M = M		Y I Y I Y I Y
Full Name of Payee United States Postal Service		☐ Memo l	tem Dat	M M	/ D D /	Dissemination
Mailing Address 401 E South St			Am	05 ount	21	2014
City	Chaha	Zin Cada				4070.45
City Jackson	State MS	Zip Code 39201			D: SE.4319 ursement or C	1976.15 Obligation
Purpose of Expenditure Postage for Mail		Category/ Type 004		05 ^M	20	2014
Name of Federal Candidate		Support	Office Sou	aht:	House	District:
Mr. Christopher Brian McDaniel		X Oppose			✗ Senate	State: MS
Calendar Year-To-Date Per Election for Office Sought	7	1023091.85	Disbursem 2014	ent For:	➤ Primary	General
Full Name of Payee		Memo Ito	em Dat			/Dissemination
Winning Edge				05 N	/ 21 /	2014
Mailing Address PO Box 269			Am	ount		
City	State	Zip Code	-			19187.14
Alexandria	AL	36250			D: SE.4322 ursement or C	Obligation
Purpose of Expenditure Mail Production		Category/ Type 004		05 05	20 /	2014
Name of Federal Candidate		Support	Office Sou	ight:	House	District:
Mr. Christopher Brian McDaniel		x Oppose	Pres	sident	x Senate	State: MS
Calendar Year-To-Date Per Election for Office Sought	7 1 7	1042278.99	Disbursem 2014	ent For: Other (s	Primary pecify) ▶	General
(a) SUBTOTAL of Itemized Independent Expenditu				7		21163.29
(b) SUBTOTAL of Unitermized Independent Expendent	ditures		·· •			
(c) TOTAL Independent Expenditures			▶		-	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candic party committee) any political party committee or it	date or authorize	•				•
Mr. Brian Perry	[Electro	onically Filed] Date	e 09	/ 02	/ Y Y 201	6 Y
Cianatura					ننسا ا	

ITEMIZED INDEPENDENT EXPENDITURES	PAGE 37 OF 40 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	I IDENTIFICATION NUMBER ▼
Mississippi Conservatives	
Check if 24-hour report 48-hour report New report Amends report filed on	/ D = D / Y = Y = Y
Full Name of Payee	ublic Distribution/Dissemination
Mailing Address PO Box 269 Amount	22 2014
Amount	
City State Zip Code	64703.26
Date of Di	n ID : SE.4336 isbursement or Obligation
Purpose of Expenditure Mail Printing, Production and Postage Category/ Type 004 05	/ D D / Y Y Y Y Y 2014
Name of Federal Candidate Support Office Sought:	House District:
Mr. Christopher Brian McDaniel Mr. Christopher Brian McDaniel Mr. Christopher Brian McDaniel President	Senate State: MS
Calendar Year-To-Date Per Election for Office Sought Disbursement For 2014 Other	r: ✓ Primary General (specify) ✓
Full Name of Payee Winning Edge Date of Pt 05	ublic Distribution/Dissemination
Mailing Address PO Box 269 Amount	
City State Zip Code	27794.31
Date of Di	n ID : SE.4337 isbursement or Obligation
Purpose of Expenditure Mail Printing, Production and Postage Category/ Type 004 05	22 / 2014
Name of Federal Candidate Support Office Sought:	House District:
Mr. Christopher Brian McDaniel Mr. Christopher Brian McDaniel President	Senate State: MS
Calendar Year-To-Date Per Election for Office Sought Disbursement Fo 2014 Other	r: X Primary General (specify) >
(a) SUBTOTAL of Itemized Independent Expenditures	92497.57
(b) SUBTOTAL of Unitemized Independent Expenditures	7 1 7 1 7 1
(c) TOTAL Independent Expenditures	7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in coope with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the party committee) any political party committee or its agent.	
	2 2016

Mr. Brian Perry

Signature

SCHEDULE E (FEC Form 3X) TEMIZED INDEPENDENT EXPENDITU	IRES			PAGE 38	3 OF 40
				FOR LINE	24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICAT	TION NUMBER ▼
Mississippi Conservatives				C C00554774	
Check if 24-hour report 48-hour report	rt New rep	ort Amends repo		M / D D	/
Full Name of Payee Winning Edge		☐ Memo It	em Date	of Public Distributio	n/Dissemination
Mailing Address PO Pay 260			L	05 28	2014
PO Box 269			Amou	nt	
City	State	Zip Code			68466.55
Alexandria	AL	36250		ction ID : SE.4354 of Disbursement or	Obligation
Purpose of Expenditure Mail Printing, Production and Postage		Category/ Type 004	M	05 / 28	2014
Name of Federal Candidate		x Support	Office Sough	it: House	District:
Thad Cochran		Oppose	Preside	ent Senate	State: MS
Calendar Year-To-Date Per Election for Office Sought		1620072.85	Disbursemen 2014 O	t For: X Prima ther (specify) ►	ry General
Full Name of Payee		☐ Memo Ite	em Date	of Public Distribution	on/Dissemination
Winning Edge				05 28	2014
Mailing Address PO Box 269			Amou	ınt	
City	State	Zip Code			2074.00
Alexandria	AL	36250		of Disbursement or	
Purpose of Expenditure Pushcard Production and Distribution		Category/ Type 004		05 / 28	2014
Name of Federal Candidate		✗ Support	Office Sough	nt: House	District:
Thad Cochran		Oppose	Preside		State: MS
Calendar Year-To-Date Per Election for Office Sought		1622146.85	Disbursemer 2014	nt For: x Prima	ry General
(a) SUBTOTAL of Itemized Independent Expe	enditures		•		70540.55
(b) SUBTOTAL of Unitemized Independent Ex	openditures		•		
(c) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the indewith, or at the request or suggestion of, any of	andidate or authorized				
party committee) any political party committee	or its agent.				

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Date

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Mr. Brian Perry

Signature

	CHEDULE E (FEC Form 3X) EMIZED INDEPENDENT EXPENDITURES				PAGE 39	OF 40 4 OF FORM 3X
N	AME OF COMMITTEE (In Full)			FEC II	<u> </u>	ON NUMBER ▼
N	Mississippi Conservatives			LaT.	C00554774	
Cl	heck if 24-hour report 48-hour report New report	Amends repo		M = M		Y Y Y
	Full Name of Payee Winning Edge	Memo It	Bato			Dissemination
	Mailing Address PO Box 269			05	28	2014
	PO Box 269		Amo	unt		
	City State Zip Code Alexandria AL 36250) : SE.4357	926.00
	Purpose of Expenditure Pushcard Production and Distribution Categor Typ			M M M O5	ursement or C	2014
	Name of Federal Candidate Thad Cochran	Support	Office Soug		_	District:
	Calendar Year-To-Date Per Election for Office Sought 1623072.	-	Disburseme 2014	L	X SenateX PrimaryDecify) ►	State: MS General
	Full Name of Payee Winning Edge Mailing Address PO Box 269	∐ Memo lte	Amo	M 05	23	Dissemination 2014
	City State Zip Code		ΗГ.		1 1 70	12883.23
	Alexandria AL 36250				D:SE.4362 ursement or C	Obligation
	Purpose of Expenditure Mail, Production and Postage Categor Typ] [M 05	30	2014
	Name of Federal Candidate	Support	Office Soug	ıht:	House	District:
	Mr. Christopher Brian McDaniel	Oppose	Presid	dent	X Senate	State: MS
	Calendar Year-To-Date Per Election for Office Sought 1635956.	08	Disburseme	ent For: Other (sp	rimary x Primary x Decify) ▶	General
	(a) SUBTOTAL of Itemized Independent Expenditures		· [7	13809.23
	(b) SUBTOTAL of Unitemized Independent Expenditures		· •		1 1 7	
	(c) TOTAL Independent Expenditures		• [-	1 1 2	
	Under penalty of perjury I certify that the independent expenditures reported with, or at the request or suggestion of, any candidate or authorized committee party committee) any political party committee or its agent.					

[Electronically Filed]

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Date

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SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

40 40 PAGE OF FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ Mississippi Conservatives C00554774 Amends report filed on Check if 24-hour report 48-hour report New report Full Name of Payee Memo Item Date of Public Distribution/Dissemination Winning Edge 05 30 2014 Mailing Address PO Box 269 Amount State Zip Code 8084.54 City Alexandria ΑL 36250 Transaction ID: SE.4363 Date of Disbursement or Obligation Purpose of Expenditure Category/ Mail, Production and Postage 004 05 30 2014 Type Name of Federal Candidate Support Office Sought: House District: Mr. Christopher Brian McDaniel MS Oppose **x** Senate President State: **X** Primary Disbursement For: General Calendar Year-To-Date 2014 1644040.62 Per Election for Office Sought Other (specify) ▶ Memo Item Full Name of Payee Date of Public Distribution/Dissemination Mailing Address Amount City State Zip Code Date of Disbursement or Obligation Purpose of Expenditure Category/ Type Name of Federal Candidate Support Office Sought: House District: Oppose President Senate State: Disbursement For: Primary General Calendar Year-To-Date Per Election for Office Sought Other (specify) ▶ (a) SUBTOTAL of Itemized Independent Expenditures..... 8084.54 (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... 1036757.15 Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Mr. Brian Perry [Electronically Filed] 09 02 2016 Date Signature